

IN THE UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF ILLINOIS

ERIC WARE,

v.

PLAINTIFF.

NEDRA CHANDLER,

GUY PIERCE,

DOCTOR DAHIYA,

CHAPLAIN JONES, and

ROGER E. WALKER JR.,

DEFENDANTS.

)
No. 08 C 50158

|Capita

RECEIVED

JUL 29 2008

MICHAEL W. DOBBINS
~~CLERK, U. S. DISTRICT COURT~~

COMPLAINT

Plaintiff Eric Ware, for his complaint, states as follows:

PARTIES

1. Plaintiff Eric Ware is a prisoner in the custody of the Illinois Department of Corrections and currently resides at the Dixon Correctional Center in Dixon, IL. At all times relevant to this action, he resided at the Dixon Correctional Center, and several other prisons across the State of Illinois.

2. Defendant Nedra Chandler is the Warden of the Dixon Correctional Center. She is being sued in her individual capacity for damages, and in her official capacity for injunctive relief.

3. Defendant Guy Pierce is the Deputy Director for the Northern District of Illinois, including the Dixon correctional center. He is being sued in his individual capacity for damages, and in his official capacity for injunctive relief.

4. Defendant Dahiya is a Doctor at the Dixon Correctional center. He is being sued in his individual capacity for damages and in his official capacity for injunctive relief.

5. Defendant Jones is a Chaplain at the Dixon correctional Center. He is being sued in his individual capacity for damages and in his official capacity for injunctive relief.

6. Defendant Roger E. Walker Jr. is the Director of the Illinois Department of Corrections. He is being sued in his individual capacity for damages and in his official capacity for injunctive relief.

JURISDICTION AND VENUE

7. This action arises under 42 U.S.C. 1983 to redress the deprivation under color of state law of rights, privileges and immunities secured by the Constitution of the United states. The rights sought to be redressed are guaranteed by the First, Eighth and Fourteenth Amendments to the United States Constitution. The Court has Federal Question Jurisdiction over this controversy under 28 U.S.C. 1331, 1367, and 1343.

8. Venue is proper in the Northern District of Illinois under 28 U.S.C. 1391. The acts complained of occurred there, Plaintiff was incarcerated there at the time of the acts complained of, and all Defendants work and/or conduct business there.

STATEMENT OF FACTS

9. The Plaintiff is an individual who suffers from a severe ulcer and consumes medication for it. The Plaintiff has consumed this medication over a period of years from different institutions across the State of Illinois.

10. The Plaintiff is alergic to soybean products. The soybean food that Defendants, Chandler, Pierce and Walker allows him to eat causes him a severe injury to his stomach and his intestines.

11. The soybean food which is served at least three times a day increases Plaintiff's ulcer complications. He suffers from constant stomach pains, acid reflux, the regurgitation of blood, and dizziness.

12. The soybean contains ingredients that causes the Plaintiff's stomach acids to work harder which is an increase of acids that eats away through his stomach and intestinal track.

13. The Plaintiff has to traffic and trade with other offenders in order to receive foods off of the commissary that he cannot afford to purchase, nor will the Defendants allow him.

14. On many occassions the Plaintiff is forced not to eat at all because the Defendants, Chandler, Pierce and Walker, will not allow him an alternative diet which does not contain soybean products.

15. The Defendants serve soybean in every male institution in Illinois because they believe thats its cheaper to purchase, but the detriment is greater on the Plaintiff and others in odds with a cheaper purchase of soybean products.

16. The Plaintiff has complained about the severity of being compelled to eat soybean food products which causes him to suffer a substantial physical harm but the Defendants have not done anything to remedy the deprivation.

17. The Plaintiff has grieved this issue over a period of years and the Defendant, Roger E. Walker Jr. has completely ignored the Plaintiff's grievances by not answering them and such as Defendants, Pierce and Chandler.

18. The Plaintiff appeared before Defendant, Doctor Dahiya, and requested that his medication be changed from Zantac to Prilosec, because due to the enormous consumption of soybean food, the Zantac had little helping affect.

19. The Plaintiff was also before the Doctor to have his callous removed surgically from his feet, and have a rash examined. The Doctor told Plaintiff to sever the callous off with a state issued razor and not to worry about the rash.

20. The Plaintiff explained to the Doctor that it would be impossible to surgically remove the painful callousess with a simple razor, and that the rash was spreading all over his body and itches, and in conclusion the Plaintiff asked Dahiya why he would not allow him any medical attention.

21. The Defendant then stated, (if you ask me nicely, I may help you). The Plaintiff replied by saying, (I have been curtious to you since I've been in your presence today).

22. Doctor Dahiya then replied, (you can leave now), and the Plaintiff replied by saying, (thats just like you foreigners, yall come from over sees expecting to do little work and get paid big), the Defendant became extrmly angry and shouted, (get out of here, you get out of here), meaning his office of work.

23. During his temper tantrum, he attempted to remove a curtain by reaching over the Plaintiff, and purposely struck the Plaintiff with the curtain and the Plaintiff immediately reported the assault and battery.

24. The Doctor never even took the time to investigate the Plaintiff's claims about the soybean products severly affecting his digestive system and thats what the Defendant called the Plaintiff over to his office for.

25. Doctor Dahiya was deliberately indifferent to the Plaintiff's medical needs. The Plaintiff is subject to intence stomach pains, he's constantly regurgitating food and blood, suffers from acid reflux, and headaches, and the Defendant new this from the Plaintiff's medical reports and brief conversation about the matter which was quickly arrested by the Defendant Dahiya.

26. The Plaintiff is compelled from time to time to walk witout shoes due to the painful callous on his feet and he cannot afford to purchase any shoes and Defendants, Chandler, Pierce or Walker, will not give him any even though the Plaintiff has grieved this matter which has been completely ignored an unanswered.

27. The Plaintiff's feet are in a condition that precludes him from walking to the chow hall to eat and participate in other movement in the institution, on occasions.

28. The issue with the soybean food products could have been resolved if the Defendants, including Chaplain Jones would have allowed the Plaintiff his religious Islamic diet which is a Halal meal.

29. The Plaintiff has complained over the years to Mr. Walker, and has recently complained to the remainder of the Defendants via grievances which have already been fully exhausted through Springfield, and the Plaintiff has been denied an Islamic meal.

30. An Islamic meal consists of meats that have been properly slaughtered by a Muslim which is called Zabiha meat. The Defendants supplies the Jewish faith with Kosher diets, the Hebrew faith with Vegan diets, and other faiths with diets pertinent to their faiths.

31. The Plaintiff is a practicing Muslim and is sincere in his faith. A simple Halal diet would have decreased the burden of Plaintiff suffering from stomach pains, throwing up food and blood, weight loss, headaches and mental discontent, and filing this lawsuit.

32. A Halal diet for a Muslim cost no more than a diet for the other faiths named above. The Dixon Correctional Center has a Muslim Chaplain, but the Muslims including the Plaintiff are under the scrutiny of a Christian Chaplain which decides what meals are appropriate for the Muslim faith, which is Defendant Jones who has denied the Plaintiff an Islamic diet.

CAUSES OF ACTION

33. Plaintiff incorporates paragraphs 1-32 as if set forth in full.

34. By consciously subjecting Plaintiff to grossly inhumane and dangerous conditions of confinement and to the extreme deprivations of basic medical care described herein, Defendant have acted, and will continue to act, with deliberate indifference to Plaintiff's serious health and safety needs, and violated, and will continue to violate, Plaintiff's rights under the Eighth and Fourteenth Amendments of the United state Constitution and 42 U.S.C. 1983.

35. By Placing and retaining Plaintiff where the conditions of confinement impose on Plaintiff atypical and significant hardships in relation to the ordinary incidents of prison life, without affording Plaintiff minimal notice to be heard, and other basic procedural safeguards, Defendants have denied, and will continue to deny, Plaintiff Due Process, in violation of his rights under the Fourteenth Amendment of the United state Constitution and 42 U.S.C. 1983.

36. By refusing to provide Plaintiff with a religious Diet, the defendants have violated, and will continue to violate Plaintiff's rights under the First, Eighth, and Fourteenth Amendments of the United State Constitution and Religious Land Use and Institutionalized Persons Act.

RELIEF REQUESTED

THEREFORE, Plaintiff Eric Ware prays for judgment and relief including:

(A) Judgment that Defendants have violated, and will continue to violate, Plaintiff's rights under the First, Eighth, and Fourteenth Amendments of the United States Constitution and Religious Land Use and Institutionalized persons Act.

(B) A preliminary and permanent Injunction directing the Defendants to provide Plaintiff with legally-required conditions and services, including prompt access to medical attention and a Religious diet known to muslims as a Halal diet.

(C) Damages in the amount of \$500,000 from each Defendant; and punitive damages in the amount of \$500,000 against each Defendant, and

(D) Such other relief as this court may deem just and proper.

JURY DEMAND

Plaintiff demands trial by jury on all issues so triable.

RESPECTFULLY SUBMITTED:

Eric Ware

ERIC WARE R-32516
DIXON CORR. CTR.
2600 N. Brinton Ave.
DIXON, IL. 61021

STATE OF ILLINOIS) WARE V. CHANDLER et al.
)
COUNTY OF LEE)

AFFIDAVIT

I, Eric Ware, being first duly sworn upon oath deposes and state as follows:

1. The contents in my Complaint and Motion for a Preliminary Injunction are true and correct to the best of my ability.
2. In the month of July, 2008, possibly on the 17th. I received a physical examination from a Physician Assistant named, Ms. Colgen. The examination was in response to my claim of assault and battery under the Code of Criminal Offenses to the security personnel at my institution.
3. I have also filed emergency grievances which have been denied in relation to this cause of action.
4. I have attached a copy of documents which gives an explication of what soybean does to the human body, and I intend to have Doctors and others as expert witnesses in this cause of action.

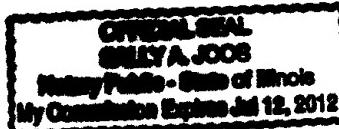
FURTHER THE AFFIANT SAYETH NOT

AFFIANT:

Eric Ware ERIC WARE R-32516

Subscribed and Sworn to before me
this 25th day of July, 2008.

Sally A. Joos
Notary Public



STATEVILLE

SPEAKS

AUGUST 2007

VOICES FROM INSIDE... QUARTERLY NEWSLETTER SPECIAL MEDICAL ISSUE

Demands for Medical and Human Rights in Prison

Bill Ryan

The U.S. Attorney, Peter Fitzgerald, has been contacted regarding the need for an investigation into possible violations of human rights in the prisons of the Illinois Department of Corrections (IDOC). The letter, delivered on behalf of the National Alliance Against Racism and Political Repression (NAARPR), was written by Ted Pearson, co-chair, and several other individuals and organizations. The letter delivered to Fitzgerald's office on May 8, 2007, also requested a meeting to discuss a number of concerns. The U.S. Attorney's office has informed me that the request is under review.

On May 10, 2007, I wrote a letter to Governor Rod Blagojevich urging him to commit to appropriate medical care for prisoners, which meets generally accepted standards of the community at large. This care should be monitored by an independent agent. I contacted the Governor's office and was told the letter has been referred to the IDOC.

The following is the text of the letter sent to U.S. Attorney Fitzgerald.



Individual case summaries have been deleted.

* * *

Dear Mr. Fitzgerald,

On behalf of our organization (the "NAARPR") and many other people concerned about human rights in the State of Illinois we respectfully request a meeting with you to discuss the need for an investigation into violations of human rights of people

incarcerated in the prisons of the Illinois Department of Corrections. Please call us at your earliest convenience to arrange a meeting. You may reach Ted Pearson at 312-939-2750, or Bill Ryan at 708-531-9923.

Specifically, we are concerned with a pattern of denial of adequate medical care to prisoners, which constitutes "cruel and unusual punishment" in the terms of the Eighth Amendment to the United States Constitution. "Excessive bail shall not be required, nor excessive

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fines imposed, nor cruel and unusual punishments inflicted." Men and women incarcerated in the Illinois Department of Corrections (IDOC) have a right to receive appropriate medical care that meets the generally accepted standards of the community at large.

International Legal Standards

The United Nations charter, to which the United States is a signatory and which has the force of law within the United States, states: "All persons deprived of their liberty shall be treated with humanity and with respect for the inherent dignity of the human person." International human rights law also governs the treatment of prisoners in the United States.

The United States is a party to the International Covenant on Civil and Political Rights (ICCPR), which guarantees to all persons the right to life, and to be free from cruel, inhuman or degrading treatment; and if deprived of their liberty to be treated with humanity and with respect for the inherent dignity of the human person.

The United States is also a party to the Convention Against Torture (CAT), which protects all persons from torture and ill-treatment; and a signatory of the International Covenant on Economic, Social and Cultural Rights (ICESCR), which guarantees the right to the highest attainable standard of health.

The obligations to protect the rights to life and health and to protect against torture and other ill treatment create positive duties on the part of government with respect to people who have been lawfully incarcerated following conviction for violations of law. Such people are no longer free to access the services of health care providers in the general community. The state, therefore, must ensure people it has imprisoned access to adequate medical services and take appropriate measures necessary to prevent and control disease.

LEGAL MAIL

The written testimony of prisoners in the IDOC and independent review of the medical records of many of the same prisoners, provides ample evidence that the rights of prisoners to adequate medical care is being violated. This is a violation of the civil rights of these prisoners under U.S. Constitution and international treaties signed and ratified by the United States. The lack of adequate medical care has caused unnecessary pain, suffering and even death of people in the custody of the Illinois Department of Corrections.

In addition, there are documented cases in which members of the prison staff have inflicted terrible beatings on prisoners that have resulted in their hospitalisation and death.

Diseases such as diabetes and cancer require close central management that all too often is absent. Prisoners referred to outside community hospitals for diagnoses or surgery often receive inadequate follow-up or in some case no follow up. Cases of chronic infection by hepatitis C virus are notable in that the protocols adapted by the IDOC itself are ignored. Preventive and case management requiring dietary modifications, regular checkups, physical therapy and exercise, and dental care, is practically nonexistent. Illness, injury and mental health problems are treated as disciplinary problems rather than medical problems.

There is no centralized database in which illnesses and injuries are recorded together with case outcomes. Each of the 45 prisons housing the 46,000 prisoners operate as isolated institutions. Thus there is no way to measure performance of the IDOC medical services on a system basis. Therefore the only objective measure of performance is the body of narratives of prisoners themselves in letters to their families and supporters on the outside, together with their medical records. This information can only constitute the "tip of the iceberg" regarding the inadequacies of the IDOC medical care

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Prisoner Denied Care?

Case 3:08-cv-50158 Document 1 Filed 07/29/2008

The National Alliance Against Racist and Political Repression - Chicago is gathering evidence about medical care in Illinois prisons. The denial of medical care to prisoners who are sick or injured is a denial of the Constitutional right of all prisoners under the Eighth Amendment to be free from cruel and unusual punishment. We are interested in all prisoners with undiagnosed or untreated medical problems. Prisoners with chronic diseases and conditions seem to have the most difficulty, especially people with hepatitis C, diabetes, cancer, high cholesterol, high blood pressure, multiple sclerosis and other debilitating conditions, and mental health issues.

If you are interested in participating in this process, write to Ted Pearson, National Alliance Against Racist and Political Repression - Chicago, 1325 S Wabash Ave, Suite 105, Chicago IL 60605, 312-939-2750.

N.I.V. has over 700+ members

We organize the voices of many to support legislation in-line with our mission statement.

The N.I.V. Mission Statement is to better society by assisting to reduce overcrowding of prisons, reduce recidivism and improve societal productivity by strengthening rehabilitation, reforming sentencing and implementing programs to advocate positive change, productivity and restorative justice for the benefit of society as a whole.

CITY _____

ADDRESS: _____
(signature)

STATE: _____ ZIP: _____
(signature)

Mail slip to: N.I.V. P.O. Box 8546, Chicago, IL 60656.
(signature)

Join the N.I.V. Mission in support of positive change

program requiring a system wide thorough human rights investigation.

The NAARPR-Chicago has received letters complaining of inadequacies in the health care system from over 182 prisoners in custody of the IDOC. So far, 125 of these prisoners have authorized the release of their medical records to the NAARPR-Chicago. To date we have 107 prisoner medical records, or "charts." A certified nurse practitioner has reviewed and summarized approximately 39 of these charts so far. A summary of that process is included as a supplement with this letter. Due to the requirements of the federal Health Insurance Portability and Accountability Act (HIPAA), the NAARPR-Chicago is not able to name most of the prisoners for whom we have charts or authorizations. However, the NAARPR-Chicago will forward any request from you for more information.

Some of these cases, which have been reported to family members and supporters, are especially alarming, and raise a bright red flag signalling the need for investigation. We respectfully request an opportunity to meet with you and discuss the need for a full and complete investigation of the Illinois Department of Corrections health care system. Sincerely yours,

Ted Pearson
Bill Ryan
Clarice Durham, Josephine Wyatt,
Elizabeth Benson, Norman Roth
Kevin Lindemann,
Mildred Williamson,
Wilma Lewis
Gloria Johnson
Reverend Doris Green
Judith Stuart
Jacki Gansch
Gayle Willard
Linda Goodman■

HJR-80 Report

Bill Ryan

The HJR 80 committee meeting on May 23 consisted of reports from the Health and Indeterminate Sentencing

Page 12 of 32

Subcommittees and the submission of a research narrative by Professor Henderson.

Professor Henderson submitted a comprehensive survey of literature on the following topics: managing and treating long-term inmates; managing medical and mental health issues; faith-based services in corrections; the impact of educational programming on institutional behavior and post-release recidivism; the role of victims; a review of restorative justice programs in institutions and victim wrap-around programs; parole and indeterminate sentences.

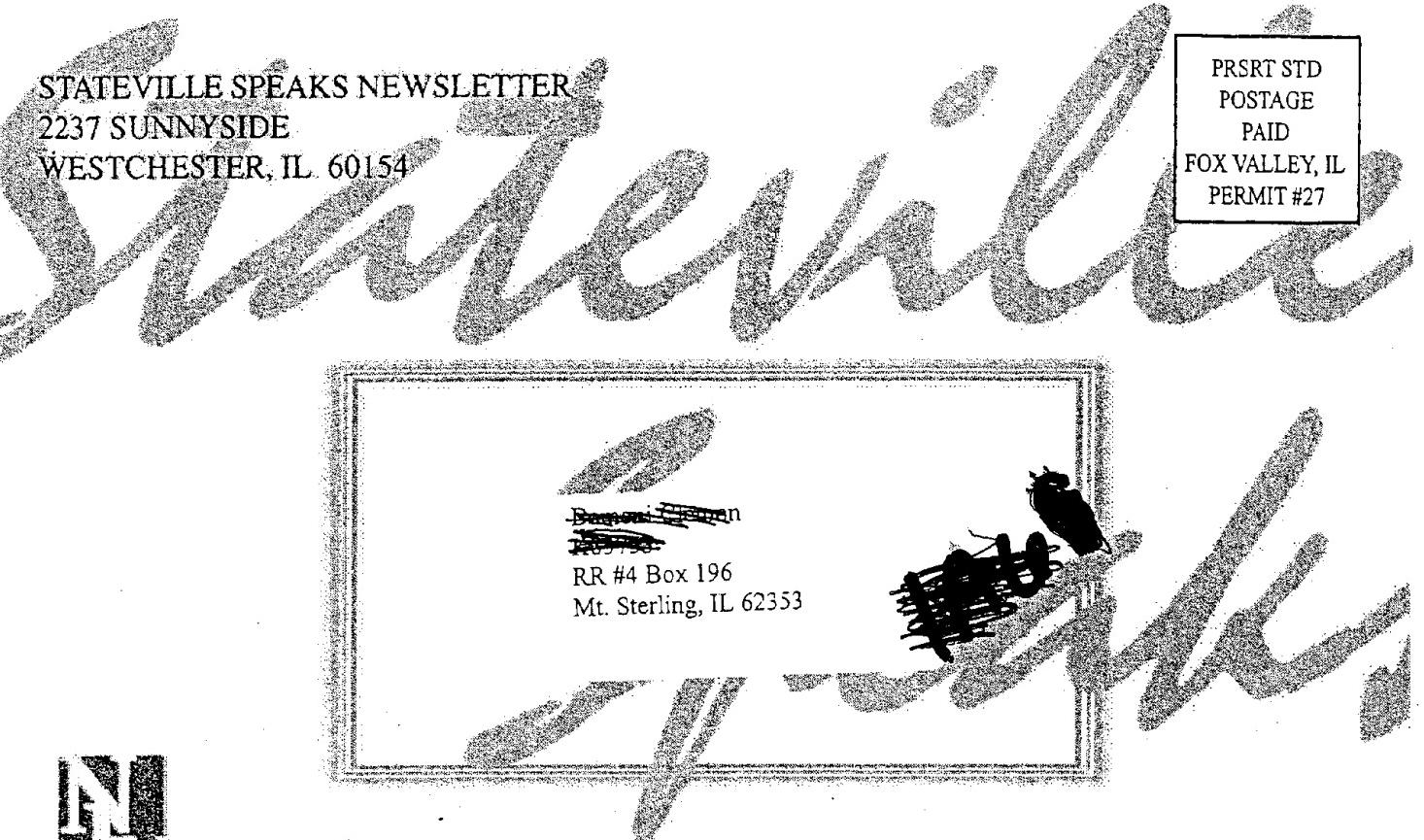
Bill Ryan, Chair of the Health Subcommittee, submitted a report that suggested that a historical report of suicides by prisoners be submitted and that the IDOC diet be evaluated by a nutritional expert. Menard, for instance, has no alternative diet for prisoners who are allergic to soy. There have been reports of inadequate response by medical staff to health issues.

Ted Pearson of the National Alliance Against Racism and Political Repression (NAARPR) presented the preliminary results of a study entitled, *Health Care in Illinois Prisons: A human rights and public health crisis*. The NAARPR is in direct contact with 160 men and women in IDOC who have submitted complaints about medical care. Charts of 95 have been received with thirty-eight reviewed by a certified nurse practitioner. Pearson reported, "The work done so far reveals a system that fails to meet a standard of care that would be accepted in the general community." The Constitutional as well as international standard that mandate appropriate medical care for prisoners were cited in the report.

Pearson noted there is no centralized database of medical care within IDOC so it is not possible to obtain objective statistical evaluation of the effectiveness of the system. The paper noted follow-up after treatment is often lacking, especially in cases of diabetes and cancer. Several specific recommendations were made to alleviate the current situation.

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STATEVILLE

ISSUE 624 SEPTEMBER 2008

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"All persons deprived of their liberty shall be treated with humanity and with respect
for the inherent dignity of the human person."
—Article 10, International Covenant on Civil and Political Rights

Chad Bell of Jemmer and Block presented a paper prepared by Anton Vilkas, former U.S. Attorney and member of the 1993 Task Force on Crime and Corrections. The paper urged increased vocational and educational programs for prisoners.

Justice and Reconciliation Project, presented a paper urging the committee to consider a range of victim issues, including proper notification and a proposal for restorative justice.

The next meeting is September 24. There will be visits by the Subcommittee to Menard, Tamms, Stateville, and Dwight prior to that meeting.

Midterm election results showed that James Sayles of the C# group composed a paper focusing on risk assessment, open hearings, PRB orientation, DOC staff recommendation, recusal and three-year majority vote, recusal and three-year charge. Midley also suggested that the committee may want to examine discipline. Midley recommended sentencing for juveniles and mandatory minimum sentences for adults before the law.

Every one has the right to layout and design; like Cole Universal Declaration of Human Rights
Article 6, UN

Demands for Medical and Human Rights in Prison
PAGE ONE
PAC-E THREE
HR80 Update
Publisher: Bill Ryan
Coproducer: Shaeen Fazal
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Human Rights
Article 12, UN

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Article 12, UN

IN THIS ISSUE

Shaeen Fazal of the Long-Term Prison Policy Project submitted a preliminary report recommending that outsource an independent ombudsman be created to hearlich care be returned to the DOC, that increased written complaints, that there be an review and special attention paid to elderly and preventive medicine.



The Dark Side of Soy

By Mary Vance, Terrain

Posted on July 9, 2007, Printed on July 9, 2007

<http://www.alternet.org/story/56087/>

As someone who is conscious of her health, I spent 13 years cultivating a vegetarian diet. I took time to plan and balance meals that included products such as soy milk, soy yogurt, tofu, and Chick'n patties. I pored over labels looking for words I couldn't pronounce -- occasionally one or two would pop up. Soy protein isolate? Great! They've isolated the protein from the soybean to make it more concentrated. Hydrolyzed soy protein? I never successfully rationalized that one, but I wasn't too worried. After all, in 1999 the Food and Drug Administration (FDA) approved labeling I found on nearly every soy product I purchased: "Diets low in saturated fat and cholesterol that include 25 grams of soy protein a day may reduce the risk of heart disease." Soy ingredients weren't only safe -- they were beneficial.

After years of consuming various forms of soy nearly every day, I felt reasonably fit, but somewhere along the line I'd stopped menstruating. I couldn't figure out why my stomach became so upset after I ate edamame or why I was often moody and bloated. It didn't occur to me at the time to question soy, heart protector and miracle food.

When I began studying holistic health and nutrition, I kept running across risks associated with eating soy. Endocrine disruption? Check. Digestive problems? Check. I researched soy's deleterious effects on thyroid, fertility, hormones, sex drive, digestion, and even its potential to contribute to certain cancers. For every study that proved a connection between soy and reduced disease risk another cropped up to challenge the claims. What was going on?

"Studies showing the dark side of soy date back 100 years," says clinical nutritionist Kaayla Daniel, author of *The Whole Soy Story* (New Trends, 2005). "The 1999 FDA-approved health claim pleased big business, despite massive evidence showing risks associated with soy, and against the protest of the FDA's own top scientists. Soy is a \$4 billion [U.S.] industry that's taken these health claims to the bank." Besides promoting heart health, the industry says, soy can alleviate symptoms associated with menopause, reduce the risk of certain cancers, and lower levels of LDL, the "bad" cholesterol.

Epidemiological studies have shown that Asians, particularly in Japan and China, have a lower incidence of breast and prostate cancer than people in the United States, and many of these studies credit a traditional diet that includes soy. But Asian diets include small amounts -- about nine grams a day -- of primarily fermented soy products, such as miso, natto, and tempeh, and some tofu. Fermenting soy creates health-promoting probiotics, the good bacteria our bodies need to maintain digestive and overall wellness. By contrast, in the United States, processed soy food snacks or shakes can contain over 20 grams of nonfermented soy protein in

one serving.

"There is important information on the cancer-protective values of soy," says clinical nutritionist Ed Bauman, head of Bauman Clinic in Sebastopol, California, and director of Bauman College. Bauman cautions against painting the bean with a broad brush. "As with any food, it can have benefits in one system and detriments in another. [An individual who is sensitive to it] may have an adverse response to soy. And not all soy is alike," he adds, referring to processing methods and quality.

"Soy is not a food that is native to North America or Europe, and you have issues when you move food from one part of the world to another," Bauman says. "We fare better when we eat according to our ethnicity. Soy is a viable food, but we need to look at how it's used."

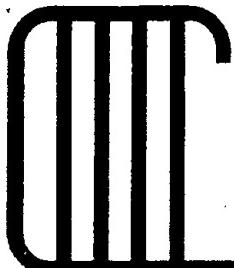
Once considered a small-scale poverty food, soy exploded onto the American market. Studies -- some funded by the industry -- promoted soy's ability to lower disease risk while absolving guilt associated with eating meat. "The soy industry has come a long way from when hippies were boiling up the beans," says Daniel.

These days the industry has discovered ways to use every part of the bean for profit. Soy oil has become the base for most vegetable oils; soy lecithin, the waste product left over after the soybean is processed, is used as an emulsifier; soy flour appears in baked and packaged goods; different forms of processed soy protein are added to everything from animal feed to muscle-building protein powders. "Soy protein isolate was invented for use in cardboard," Daniel says. "It hasn't actually been approved as a food ingredient."

Soy is everywhere in our food supply, as the star in cereals and health-promoting foods and hidden in processed foods. Even if you read every label and avoid cardboard boxes, you are likely to find soy in your supplements and vitamins (look out for vitamin E derived from soy oil), in foods such as canned tuna, soups, sauces, breads, meats (injected under poultry skin), and chocolate, and in pet food and body-care products. It hides in tofu dogs under aliases such as textured vegetable protein, hydrolyzed vegetable protein, and lecithin -- which is troubling, since the processing required to hydrolyze soy protein into vegetable protein produces excitotoxins such as glutamate (think MSG) and aspartate (a component of aspartame), which cause brain-cell death.

Soy also is one of the foods -- in addition to wheat, corn, eggs, milk, nuts, and shellfish -- most likely to cause allergic reactions. Most people equate food allergies with anaphylaxis, or a severe emergency immune response, but it is possible to have a subclinical sensitivity, which can lead to health problems over time (and is exacerbated by the lack of variety common in today's American diet).

"People can do an empirical food sensitivity test by eliminating the food for a period of time and reintroducing it to see if there's an immune response, but most don't do this," says Bauman. "Genetically modified (GM) soy is the most problematic, and that's probably what most people are eating if they're not paying attention. People can develop sensitivity to a food that has antigens or bacteria not originally in the food chain, as is the case with GM foods."



Illinois
Department of
Corrections

Western Illinois Correctional Center / R. R. 4, Box 196 / Mt. Sterling, IL 62353 / Telephone: (217) 773-4441 / TDD: (800) 526-0844

Rod R. Blagojevich
Governor

Roger E. Walker Jr.
Director

MEMORANDUM

Date: 6/14/07

To:



From: Martha Fluckey, CFSM

Subject: Request for Product Information

The amount of soy in the meat provided by ICI varies from 20% to 40% depending upon the product.

A handwritten signature in black ink that appears to read "Martha Fluckey".

Martha Fluckey
Food Service Manager

Cc: file



filled blisters, may appear. When the blisters burst, the skin becomes moist and "weeps." A person may contract eczema at any age and at any place on the body; but the ailment occurs chiefly on the ears, hands, feet, and legs. In infants and adults, it is often caused by allergy to certain proteins in soy, wheat, milk, and eggs. Eczema is best treated by finding and removing the cause. Lukewarm compresses help relieve the itching and redness of weeping skin. Once the skin is dry, it may be treated with the antiinflammatory drug cortisone. Scratching the skin should be avoided, because it may cause more weeping and further irritation and lead to a bacterial or a fungus infection.

• Heart Palpitation, rapid, often irregular, beating of the heart.

- **Hives**, known medically as urticaria, is a skin rash characterized by smooth, whitish or pinkish swellings. The swellings (wheals) look somewhat like mosquito bites and usually itch, although they may also sting or burn. Hives appear suddenly and may last several hours or days. Hives are usually not serious, and the itchiness can often be relieved by antihistamines or cold compresses. In severe cases when the larynx becomes swollen, causing shortness of breath, cortisone, adrenaline, or other drugs may be given.
- **Irritable Bowel Syndrome**, excessive frequency and looseness of bowel movements with or without cramping.
- **MSG or Chinese syndrome**. Headache, runny nose, or upset stomach after eating soy. Called Chinese syndrome because of effect of eating Chinese food with soy monsodium glutamate (MSG) and soy sauce.

• Panic Attack. Shortness of breath, sever anxiety, rapid heartbeat.

• Localized Swelling, often without itching.

• Vomiting, ejecting stomach contents through the mouth.



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Yet avoiding GM soy doesn't mean all is well, Daniel says: "One question I get all the time is, 'What if I only eat organic soy?' The assumption is that GM soy is problematic and organic is fine. Certainly, organic is better, but the bottom line is that soybeans naturally contain plant estrogens, toxins, and antinutrients, and you can't remove those."

The highest risk is for infants who are fed soy formula. "It's the only thing they're eating, they're very small, and they're at a key stage developmentally," says Daniel. "The estrogens in soy will affect the hormonal development of these children, and it will certainly affect their growing brains, reproductive systems, and thyroids." Soy formula also contains large amounts of manganese, which has been linked to attention deficit disorder and neurotoxicity in infants. The Israeli health ministry recently issued an advisory stating that infants should avoid soy formula altogether.

~~3~~ Antinutrients in soy block enzymes needed for digestion, and naturally occurring phytates block absorption of essential minerals. This is most worrisome for vegans and vegetarians who eat soy as their main source of protein, and for women in menopause who up their soy intake through supplements.

Soy contains phytochemicals -- plant nutrients with disease-fighting activity -- called isoflavones. Studies claim isoflavones can mimic the body's own estrogens, raising a woman's estrogen levels, which fall after menopause, causing hot flashes and other symptoms. On the other hand, isoflavones may also block the body's estrogens, which can help reduce high estrogen levels, therefore reducing risk for breast cancer or uterine cancer before menopause. (High estrogen levels have been linked to cancers of the reproductive system in women.)

Although soy's isoflavones may have an adaptogenic effect (contributing to an estrogen-boosting or -blocking effect where needed), they also have the potential to promote hormone-sensitive cancers in some people. Studies on the effects of isoflavones on human estrogen levels are conflicting, and it's possible that they affect people differently. In men, soy has been shown to lower testosterone levels and sex drive, according to Daniel.

Bauman believes processed soy foods are problematic but maintains that soy has beneficial hormone-mediating effects. "People are largely convenience-driven," he says. "We're looking at this whole processed-food convenience market and we're making generalizations about a plant. Is soy the problem, or is it the handling and packaging and processing of the plant that's the problem?"

"Primary sources of food are a good thing. Once there was a bean, but then it got cooked and squeezed and the pulp was separated out, and it was heated and processed for better shelf life and mouth feel. Soy milk is second or third level in terms of processing."

Bauman's eating-for-health approach calls for a variety of natural and seasonal unprocessed whole foods, including soy in moderation, tailored to individual biochemistry and sensitivities. "Using soy as part of a diet can bring relief for perimenopause, for example," he says. "Throw out the soy and you throw out the isoflavones." (It is possible to obtain plant estrogens to a lesser extent from other

foods, such as lima beans or flax.) "The literature is extensive on the benefits of soy, and that should always be stated, just as the hazards should be. That's science. These studies are not ridiculous or contrived, but take a look at them. Who's funding them?" asks Bauman.

"There are a lot of problems with these studies," Daniel says, adding that the 1999 heart health claim was an industry-funded initiative. "Even if there is positive information, and even if these studies are well designed, we need to weigh that against the fact that we've also got really good studies showing the dangers. Better safe than sorry is the precautionary principle. Possible benefits are far outweighed by proven risks."

Daniel and Bauman agree on the benefits of variety. "My experience as a clinical nutritionist is that people who have a varied diet tend not to get into trouble," says Daniel.

"We like to demonize certain foods in this society," says Bauman. "If you want to find a fault, you'll find it. The bottom line is: What is a healthy diet?"

Mary Vance is the associate editor of Terrain magazine.

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NoSoy Debunks the Bean

Print out the Soy Decoder (Soy Aliases) to use in dicussions with school and hospital dieticians. It is a list of soy food products. Beware inhalers such as Atrovent, which contains soy lecithin.

The truth is that soy is not a miracle food suppling complete protein. In the orient they had to ferment it (tofu, soy sauce) to make it edible.



What is soy?

The soybean is a legume, also known as *Glycine max*. Its products include machine oil, edible oil, printer's ink, pressed imitation food (beef, crab, pepperoni, etc.), food additives, flour, grits, and stockfeed. The United States is the largest grower of soybeans (50 percent of the world crop). It is not known in the wild and is believed to have been created through cultivation from *Glycine ussuriensis*, a wild Asian vine.

History

Chinese cultivation of soybeans began before recorded history. The soybean was considered one of five sacred grains (along with rice, barley, wheat and millet). The U.S. Department of Agriculture (USDA) began introducing varieties to the United States in the late 19th century. The vegetable oil industry started a cooperative program in the 1930s of U.S. and Canadian researchers to improve soybeans through selective breeding. The program introduced new varieties with higher yields and oil content. Subsequently, the United States became the world's largest producer of soybeans. American strains have spread to Africa, Latin America and back to Asia. Genetic improvement, aiming for better survivability (not being killed by the chemicals sprayed on them), higher yields and better protein composition, have already begun. These genetically altered beans are restricted in some European countries but are sold unmarked in the U.S.

How it is grown

Soybeans need irrigation but can be grown in most soils. They do not tolerate frost. Plants mature in 75 to 200 days. They can be used to fix nitrogen in the soil by plowing the plants under when green. Soybean seeds are hard pea shaped yellow beans harvested with combines.

Soy Products

Although not readily digested without fermenting, soybeans have seven of the eight essential amino acids, deficient only in methionine. Soybeans produce numerous foods: flour, grits, green or dried bean, soy milk, tofu (curd), cheese, soy sauce, teriyaki sauce, vegetable oil, food flavor enhancers (msg and natural flavors) and emulsifiers. Soybean protein is also used as a meat substitute. Soybeans are also the major component of domestic animal feeds (although it has been shown to stunt the growth or kill some young birds). The green crop is used for hay, forage, and fertilizer. The soybean also has industrial uses: the manufacture of glycerin, paints, soaps, linoleum, rubber

Health Claims

There have recently been a spate of health claims made for the soybean. Careful examination of the research does not support these claims.

- The cholesterol lowering research shows that cholesterol is lowered in 20 percent of the cases over the 350 level but not in people below 250. Almost anything other than lard will reduce cholesterol over 350 (unless the body is out of control and producing the cholesterol itself, in which case medication sometimes doesn't even work). You should try to keep your cholesterol in the 150 to 180 range (see your doctor).
- The claims about reducing breast cancer are based upon very slender research, namely a small select group of Japanese women, who are probably genetically not prone to breast cancer. The test needs to be performed upon women with a tendency toward or family history of breast cancer. Then see what soy does!
- Soybeans have a component which stimulates estrogen production (in both men and women) and most doctors don't recommend using estrogen in any form for people with a family history of breast cancer or fibroid tumors. A Report released this June states that women who take estrogen for more than ten years have an increased risk of breast cancer. A Yale physician specifically warned us off estrogen way back in the 1970's. Menopause is a poor time, because of the stress, to take soy as an estrogen replacement because the stress can trigger an allergy to soy (as more and more women are writing to us). See Developing a Soy Allergy below.
- Infertility. There should be an investigation of whether soy causes infertility in men (low sperm count) because of soy's estrogen stimulating properties. We suggest that males cut out soy for three months before trying to impregnate.



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SOY ALLERGY SYMPTOMS

Allergy is an abnormal reaction of the body to normally harmless substances, such as pollen, dust, certain foods (like soybeans), drugs, and insect stings. The term **allergy** comes from the Greeks and means "abnormal response." Millions of people in the United States suffer from allergies, some of which are mistaken for the common cold.

The symptoms of allergy vary with the allergen (or antigen), and with the part of the body affected. The symptoms, or allergic reactions, may include headache, sneezing, watery eyes, and nasal congestion, as in hay fever and allergic rhinitis; a rash, stomach upset, and itchy swellings on the skin (hives or blisters); spasms within the lungs that interfere with breathing, as in asthma. Rarely, a person may have an extreme allergic reaction to soy. This is called anaphylactic shock. Characterized by a severe drop in

SYMPTOMS

- If you don't see your symptoms here, add them to the symptom category in the NoSoy Forum. We all need education on the subject of soy allergy.

• **Acne** is a disorder of the sebaceous glands of the skin. Sebaceous glands secrete through pores and hair follicles--which are most abundant on the face and scalp--a fatty lubricant known as sebum. Acne occurs when the pores become clogged with sebum. Blackheads--external plugs formed of sebum and dead cells--may be invaded by bacteria, which cause pus-filled inflammations, or pimples. The overlying skin may become stretched to the point of rupture, resulting in lesions and, in prolonged severe cases, eventual scarring. Adolescents are most prone to acquiring a case of acne. The exact cause of acne is not known but is believed to be related both to genetic predisposition and to the increased hormonal activity that occurs during puberty. Poor skin hygiene and lack of sunlight or exercise can often aggravate acne. Soy may increase irritation in susceptible persons.

• **Anaphylaxis** is an extreme allergic reaction to a foreign substance. Subsequent exposure can produce an overwhelming body reaction called anaphylactic shock. Symptoms of an anaphylactic reaction include severe itching, muscle spasms, facial swelling, obstruction of respiration from swelling in the larynx, and a drastic fall in blood pressure caused by widespread dilation of blood capillaries. The drop in pressure can lead to circulatory collapse and death. Anaphylaxis is treated by injecting powerful stimulants (such as adrenaline) to restore blood circulation and using antihistamines to combat the allergic reaction. If you have this symptom, you may want to ask your doctor for an EPI-PEN to carry with you.

My Candi's Day

• A **Canker** is a sore that appears as a small, white ulcer or blister in the mouth or on the lips. Occurring either singly or in clusters, cankers are often tender, and sometimes painful, sores. They tend to heal quickly without treatment but occasionally are a symptom of a serious infection instead of allergy, for example, of a viral infection or other disorder.

• **Inflammation and infection of the mucous-membrane lining of the eyelids and eyeball, or Conjunctivitis**, can be caused by allergy.

• **Dermatitis** is an inflammation, or irritation, of the skin resulting from such causes as bacteria, fungi, parasites, and allergens. It can arise directly from skin contact with external agents or as a result of disorders elsewhere in the body. The symptoms of dermatitis include itching, burning, redness, blistering, or edema (swelling). Scratching may result in secondary bacterial infection. Skin-contact dermatitis includes primary irritant, allergic, and photochemical dermatitis. Primary irritant dermatitis is the most common type and is caused by the direct toxicity of certain chemicals or foods that come in contact with the skin. Allergic dermatitis involves the immune mechanism and requires prior sensitization of an individual to agents such as cosmetics, chemicals, plants, drugs, or costume jewelry. Photochemical dermatitis occurs when an individual with photosensitizing chemicals on his skin is exposed to light.

• **Diarrhea**, excessive frequency and looseness of bowel movements.

• **Eczema**, sometimes referred to as atopic dermatitis, is a symptom of various skin disorders. It is characterized by noncontagious, itching skin on which scaly, red patches, as well as tiny, fluid-

SYMPTOMS

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Soy allergy

What is soy allergy? - Soy allergy is an immune system response to soy that the body mistakenly believes is harmful. Once the immune system decides that soy is harmful, it creates specific antibodies to it. The next time the individual eats soy, the immune system releases massive amounts of chemicals, including histamine, in order to protect the body. These chemicals trigger a cascade of allergic symptoms that can affect the respiratory system, gastrointestinal tract, skin, or cardiovascular system. About 0.5 of the population has soy allergy. Soy allergy will not show with the first exposure to the allergen. The symptoms of soy allergy will only occur upon reexposure to soy. During the first contact the person is only sensitized to soy. The immune system reacts only at contacts with soy that occur later. Not all soy products may cause soy allergy. Some fermented soy foods, such as tempeh and miso, may cause less soy allergy than whole soybeans. Soybean oil, which does not contain soy protein, does normally not produce soy allergy.

Most common allergens - In adults foods to cause allergic reactions include: shellfish, peanuts (can cause severe anaphylaxis), nuts, fish and eggs. In children, the pattern is somewhat different. The most common food allergens that cause problems in children are eggs, milk and peanuts.

Symptoms of soy allergy - The reported symptoms of soy allergy include: acne, angioedema, rhinitis, anaphylaxis, asthma, atopic dermatitis, bronchospasm, cantankerous colitis, conjunctivitis, diarrhea, diffuse small bowel disease, dyspnea, eczema, enterocolitis, fever, hypotension, itching, laryngeal edema, lethargy, pollinosis, urticaria, vomiting, and wheezing. If you suspect that you or your child may have soy allergy or intolerance, you can conduct your own test by completely eliminating soy for a set number of days. Then try just one soy product to see if it causes adverse reactions. Keep in mind that intolerance reactions can occur as long as 48 hours after ingestion of an offending substance.

Cross reactivity with soy - People with soy allergy may also cross react to certain foods such as peanuts, green peas, chick peas, lima beans, string beans, wheat, rye and barley.

How to prevent soy allergy - If possible, breastfeed your infant for the first 6 months of life. Do not give solid foods until your child is 6 months of age or older. Avoid cow's milk, eggs, peanuts, and fish during your child's first year of life.

Find Allergy-safe Foods

Kid-friendly allergen-free food: Cookies, meals, snacks, pasta, etc.

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Allergies Health Center Guide

Allergies: Living With a Soy Allergy

Soybeans are legumes. Other foods in the legume family include navy beans, kidney beans, string beans, black beans, pinto beans, chickpeas (garbanzo or chichi beans), lentils, carob, licorice and peanuts. Many people are allergic to more than one legume. If your doctor is unable to identify which soy product is causing your allergy, it is best to avoid them all.

It is not always easy to avoid these foods since many unsuspecting products may contain soy.

Who Gets Soy Allergy?

Soy allergy is more common in infants. The average age at which the allergy manifests is 3 months but the majority of infants outgrow it by the age of two. Although adults do suffer from soy allergy, it is rare.

What Are the Symptoms?

Symptoms of soy allergy are many and may include:

- Acne and other skin conditions, like eczema
- Swelling
- Nasal congestion
- Anaphylaxis
- Asthma
- Canker sores or fever blisters
- Colitis and other gastrointestinal problems, including diarrhea
- Conjunctivitis
- Shortness of breath
- Fever, fatigue, weakness and nausea
- Low blood pressure
- Itching
- Hay fever
- Hives

How Do I Avoid Exposure?

Always check the label ingredients before you use a product. In addition, check the label each time you use the product. Manufacturers occasionally change recipes, and a trigger food may be added to the new recipe.

Examples of soy products and foods that may contain soy include:

Soy Products	Soy-Containing Ingredients	Soy-Containing Food
Soy flour	Soy protein	Miso

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From: Sam Robbins - Thursday - 9/7/2006

To: [REDACTED]

Subject: Can Eating Soy Make You Fat & Depressed? ...

This is an important article mainly because so many people eat soy. Please take just a few minutes to read this email as I've done my best to really keep it short and just get to the point and state the facts.

One last comment before I start. I know there are MANY people who eat soy and think it's great because in many ways, they have been "brain washed". So, I DO understand that you've been told differently and the information in this email may go against everything you've ever heard or read about soy.

But I don't have an agenda with this. Think about all the places you've seen "pro-soy" information. Were they trying to sell you a soy product? Chances are they were. I'm just reporting the FACTS below with the THOUSANDS of REAL life clients we've had for the past decade who have ALL benefited by getting OFF of soy products!

Soy Puts Your Body In "Emergency Mode"

A few paragraphs below, I've listed a few of the diseases attributed to soy intake, but the most important one (for most of us anyway), is that fact that **excess soy in the diet pretty much KILLS your thyroid gland** (which means ... yes, you guessed it - **EXCESS body fat!**)

The Committee on Toxicity in Foods and the Environment in Great Britain reports that soy phytoestrogens "modulate thyroid hormone synthesis". They also say: "soy phytoestrogens disrupt the pituitary-gonadal axis".

This basically means - CASTRATION!

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So you have these power glands - the pituitary, the adrenals, and the S.E.X glands - harnessed together, and if one of them is suppressed, the others react, sending the system into "emergency mode". And that can make you very sick.

Soy definitely suppresses the pituitary, leading to a decrease in thyroid hormone (thyroxin) production, which can cause narcolepsy, infertility, obesity, learning disabilities, constipation, hairloss, and stunted growth. And that is only the short list.

Below are some of the other medical conditions possibly attributable to soy consumption:

- Asthma
- Chronic fatigue
- Depression
- Diabetes
- Irritable bowel syndrome
- Premature or delayed puberty
- Rheumatoid arthritis
- Thyroid conditions: Graves' or Hashimoto's disease, Goiter, Hypothyroidism,
- Uterine cancer

The REAL SCAM About Soy

Before I go any further ... do you even know why soy became popular all of a sudden a few years ago? ... There was an **EXCESS** in soy production worldwide! And, they had to figure out a way to "get rid of it" basically.

That my friend, is the basic truth. I know this to be FACT because I know very "important" people high up at the FDA and DEA. I knew about this years ago. But, as usual, It's all about the money.

Anyway, let's continue

Big Problems For Women!

One of the biggest reasons soy became popular a few years ago was its supposed attributes in helping women "fight off" various cancers and menopause problems. Unfortunately, this hasn't turned out to be true.

NOTE: If you are pregnant or trying to get pregnant. Or, if you are nursing, for sure stay away from ALL soy products. It screws up your hormones in a big way, as well as causing hormonal problems for your baby.

Five recent studies have all shown that soy is **worthless** in treating the symptoms of menopause. These studies were performed at Monash University (Australia), Iowa State University, the University of Milan (Italy), and Helsinki University (Finland). Wouldn't you

think that your gynecologist would be warning you of this, rather than prescribing artificial estrogen and progesterone, both of which have been proven to be carcinogenic, and thus adding to the problem of soy-induced disease?

Another study, this one out of the University of Pittsburgh, might be the most significant of the damning studies on soy. The researchers found that hot flashes, night sweats, and vaginal dryness improved in the placebo group, but NOT in the soy group!

Allow me to summarize these remarkable studies that should blow the lid off the soy ploy (but probably won't):

- Soy does not improve menopausal symptoms compared to placebo.
- There is no beneficial effect on frequency, duration, or severity of hot flashes or night sweats with soy.
- The best soy could do was to have an equal reduction in symptoms compared to placebo in some studies.
- In one of the studies, symptoms were relieved in the placebo group but not in the soy group.
- Soy causes insomnia in many patients.

Final Thoughts

I know for a FACT that soy is horrible for both your thyroid and hormonal levels since I have done many blood tests on myself, friends and family. Now, I'm not saying soy will kill you and maybe ONCE a week or so having some soy won't do anything bad at all.

But for those of you who are having soy daily, especially if it's 10% or more of your daily protein intake, STOP it as soon as possible!

You're going to get fatter, have muscle-loss, get depressed and have much lower S.E.X drive. In fact, one of the reasons TriLipono® works so well is because it **reverses many of the thyroid related problems of soy** and hence, users see AND feel results within the first few weeks since their thyroids are **normalizing for the first time in YEARS** thanks to the active ingredients in TriLipono®.

And here's another interesting note ... I realized just a few months ago that those who needed higher dosages of TriLipono® to see results, were often people who ~~ate~~ soy. Just some "food for thought" ...

NOTE: If you've been taking lots of soy for a few months, then you don't even need TriLipono®. Simply getting OFF ALL soy will jump start your thyroid and start the fat loss. Later, when you plateau and stop losing fat, you can begin to add in TriLipono® for added fat loss.

Reference:

- "Soy: Food, Not Pills," UC Berkeley Wellness Letter, 1/01
- "Dietary supplements of soya flour lower serum testosterone concentrations and improve markers of oxidative stress in men." Eur J Clin Nutr 2003; 57(1): 100-106

• "Possible Legal Action On Medical Problems Caused By Soy," Weston A. Price Foundation

(www.westonaprice.org), 3/30/04

• "Soy: More studies," Weston A. Price Foundation (www.westonaprice.org), accessed 4/26/04

Summary: Soy has many BAD qualities. For many people, just a little bit of soy intake can shut down their thyroids and cause problems with other hormones (such as testosterone and estrogen). This can lead to increase fat, loss of muscle, depression, hairloss, always feeling cold, brittle nails, watery or swollen eyes, lethargy, sore bones and joints.

Unfortunately, soy is used in many products these days - especially DIET products and low-carb foods. Please read the labels. Reduce ANY and ALL soy consumption. Personally, I think the most soy one should have is just once or maybe twice a week - MAXIMUM.

You don't need to eliminate it, but for sure **MINIMIZE** its consumption!

Warmest Regards,

Dr. Sam Robbins, Co-Founder
Rx Research Group, Inc.

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